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CONFIRMATION NO. 6805

SERIAL NUMBER 10/039,303	FILING or 371(c) DATE 01/02/2002 RULE	CLASS 601	GROUP ART UNIT 3764	ATTORNEY DOCKET NO. Butler *6
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APPLICANTS

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** CONTINUING DATA *****

This appn claims benefit of 60/260,025 01/05/2001

** FOREIGN APPLICATIONS *****

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **
02/01/2002

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY MI	SHEETS DRAWINGS 2	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 1
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

Verified and /GLENN E RICHMAN/

Acknowledged Examiner's Signature

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TITLE

Simulated wave massage

FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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